



Sexually Transmitted Infections

UNIT OVERVIEW

*Make me know your ways, O Lord
Teach me your paths
Lead me in your truth and teach me.
Psalm 31:3*

Duration: Number of lessons; number of hours

- | | |
|---|----------------|
| 1. Healthy Living | 40 minutes |
| 2. (a): Information about STI's | 2 x 40 minutes |
| (b): Abstinence: The Only Sure Protection | 40 minutes |

Description:

This unit builds on the section *Sexuality and Decision-making* (p. 98-100, Student Text/p. 94-95, Teacher Manual) of *Fully Alive*. Fully Alive reinforces the topics of abstinence and good, healthy ways to express affection and introduces, for the first time, sexually transmitted infection.'

BACKGROUND INFORMATION

- Our youth are surrounded by contradictory messages: 'Everybody is doing it. Sex makes you cool, grown up. If it doesn't hurt anyone, it's all right. Sex is my business. If it feels good, do it. You can't get pregnant if...etc.'
- As Catholic educators, we need to give our students a sense of awe and wonder for this great power to become co-creators with God. This power is life itself – not something trivial, not just an urge to be satisfied. It is a gift God has given us, but as with all gifts, responsibilities are attached. It is the gift of our whole selves, given in mutual love to the person with whom we promise our lives in marriage. It is not just using body parts. By giving our youth the sense of the depth of the power and mystery of their sexual expression, we hope that they will be empowered to choose abstinence as the way to help them grow and develop in all aspects of their relationships.
- Respectful and truthful information about STI's honours our students' normal curiosity and dispels myths and half truths that they may have heard. The goal is

not to scare them into abstinence, but to make moral choices because it is the way to wholeness and happiness.

- Over the past decade, increases have been reported in the incidences of 3 nationally reported STI's: Chlamydia, gonorrhea and syphilis.*
- A January 22, 2007 article from the *Ottawa Citizen* noted a drastic rise in syphilis rates in Canada. This disease was nearly eradicated less than a decade ago but has made a serious comeback. It is also spreading worldwide. One reason may be that it can be transmitted through oral sex which people do not take seriously enough
- 'Party drugs' (ecstasy, crystal meth) are increasingly being linked to promiscuous sexual behaviour*
- Anonymous partnering venues such as the internet are expanding*
- There are more than 75,000 diagnosed cases of HIV/AIDS in Canada and perhaps another 20,000 more who are unaware of their HIV infection The number of women becoming infected with HIV continues to rise.**
- HIV infection is increasing in the heterosexual community.**

*Canadian Medical Association Journal, January 16, 2007

**Centre for Infectious Disease Prevention and Control, Health Canada 2006

- Young women between the ages of 15-29 are at highest risk for developing an HPV (human papillomavirus) infection. Some HPV strains are linked to cervical cancer.
- A new vaccine, Gardasil®, (Quadrivalent Human Papillomavirus Vaccine) has recently been discovered that protects against four HPV types, which together cause 70% of cervical cancers and 90% of genital warts.
- On average, **one woman dies every day** from cervical cancer in Canada
- Failing to disclose HIV to a partner and subsequently infecting them with the virus is a criminal offence with a penalty of up to 25 years.

OVERALL EXPECTATIONS

By the end of grade 7, students will:

- Continue to deepen their appreciation of both the power and responsibility inherent in the gift of their sexuality (*new*)

- Continue to examine and apply responsible decision making *as related to this gift of sexuality*. (adapted from 4.1 FA – italics new)

Ontario Catholic School Graduate Expectations

A Graduate is expected to be:

A Reflective, Creative and Holistic Thinker Who:

- Makes decisions in light of gospel values with an informed moral conscience

ASSESSMENT AND EVALUATION

Diagnostic Assessment: Assess both individual and small group tasks based on a rubric that you have adapted from other subject areas for each specific task. The following suggestions are offered throughout the unit: posters, collages, class codes of behaviour.

Paper and Pencil Task: Assess journals for 1) articulation, 2) ability to reflect on topic's relevance to their lives

Paper and Pencil: Faq's quiz.

Group work: assess ability to design and present 'Jeopardy' game base on rubrics adapted from Drama and Language Arts.

Personal Communication: Use classroom discussion and participation to assess student knowledge and understanding of the topic.

Research Assignment: Aids in Africa (with a focus on Aids orphans and the heroic grandmothers who are left to take care of them)

LINKS TO FULLY ALIVE, AIDS; A CATHOLIC EDUCATIONAL APPROACH TO HIV, AND HEALTH AND PHYSICAL EDUCATION

1. **IMPORTANT NOTE:** Since *Fully Alive* does not introduce the risks of contraception until grade 8, teachers are instructed to respect this guideline and not introduce information related to contraception until Grade 8
2. *Fully Alive's* Unit III, *Created Sexual*, has two lessons in which to embed this new material:
A Growing Awareness of Fertility, (p.78-85 TM, p. 81-86 student text)
Topic 4, *Relating as Sexual People* (p. 90-95 TM, p. 91-100, student text)
3. STI's are taught in the Healthy Living section of the grade 7 Health and Physical Education program under Growth and Development. However, in order to present

this information from the Catholic viewpoint, it would be better to use this Family Life material rather than that presented in the OPHEA curriculum.

4. AIDS: A Catholic Approach to HIV (Ontario Catholic Schools 2nd Edition, Teacher's Manual)

SUGGESTIONS FOR ACCOMODATIONS

- As per individual student's IEP's such strategies as flexible groupings, less content expectations, scribing, rephrasing, retelling, quizzes done orally, less content expectations, pictures rather than written work, etc. are some suggestions.
- In the case of the Faq's quiz (Lesson Two), the explanation component can be omitted or done orally.
- As in all small group projects, IEP'd students need to be placed in a group in which they can both contribute and benefit.

BLACK LINE MASTERS

1. Thoughts about STI's
2. Faq's Quiz

TEACHER RESOURCES

- Diocesan Youth Office
- Local Public Health Department*

ADDITIONAL RESOURCES

(appropriate for student use)

- Fully Alive, grade 8
- Catholic Youth Update has excellent short articles on line. Access by typing Catholic Youth Update and then click on 'Archive' for these on line publications
 1. Sexuality: A Gift With Strings Attached
 2. STD's: A Life and Death Issue
 3. Acquiring an Attitude About Aids
 4. Boundaries: Respect in Relationships
- Catholic Update also has on line adult publications – Access by typing Catholic Update and then click on 'Archives' for the following:

(these would be appropriate for youth but the language may be more difficult to understand)

1. AIDS and the Consistent Ethic of Life
2. Human Sexuality: ‘Wonderful Gift’ and ‘Awesome Responsibility’

TEACHER REFERENCE WEBSITES

- Canadian HIV/AIDS Information Centre www.aidssida.cpha.ca*
- The Society of Obstetricians and Gynaecologists of Canada www.sexualityandu.ca*
- American Social Health Association www.iwannaknow.org*
- Ministry of Health and Long Term Care www.gov.on.ca/health*
- HPV-related diseases and Information www.tellsomeone.ca*

*All the above web sites and your local Public Health Department provide excellent information appropriate for teachers and parents/guardians about STI’s. However, any preventative measures associated with STI’s need to be viewed through the lens of Catholic teaching and conscience decision making. THESE RESOURCES ARE INTENDED FOR TEACHER USE, AND ARE NOT APPROPRIATE FOR USE BY GRADE 7 STUDENTS.

STI's Grade Seven

Lesson One

HEALTH LIVING

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DESCRIPTION

In developing a personal Healthy Living code, students are encouraged to include boundaries they will choose in expressing affection with members of the opposite sex.

MATERIALS

- Chart paper
- Journals

NOTES TO THE TEACHER

It is vital that we give our young people permission to think about and plan ahead for the way they will deal with their developing sexuality. Far too often, teens think sex 'just happens', that you just 'go with the flow.' In some backwards way, they think to make a plan ahead of time is wrong and thus when they find themselves in an awkward or uncomfortable situation, they are carried by the moment. Beyond the risk of pregnancy or STI's, the guilt, the sense of letting oneself down, the feeling of being used are a heavy burden to bear because of an unthinking moment.

Therefore, you can tell them, 'I want you to think about sex, to plan ahead, and if and when you are pressured about having sex, to think about what your limits and boundaries will be and why, in the long run, abstinence will make you happier.'

RESPONDING TO DELICATE ISSUES

1. Trust your sense of student and parent readiness when deciding how deeply to engage this topic.
2. Explaining STI's is delicate indeed. There will be students in your class who have some good background information, others will have more 'street level' information and may even try to shock you with their seeming coolness, and for some this will be new and possibly upsetting information. Inform your parents/guardians that you will be starting this Unit by sending a letter alerting them to the topics and giving them a chance to broach the subject matter at home first. Always remember that the Ontario Bishops have given their approval to this program.

3. When we explain transmission of STI's, it will be necessary to use the terms oral, vaginal and anal sex. Gently explain that oral sex means using the mouth to kiss private parts. Anal sex means putting the penis into the anus. This is a most dangerous practice because it causes small tears in the anus that enable infections to enter directly into the bloodstream. The typical reaction from most students will be 'yuk', 'gross', etc. Unfortunately, some young people may already have heard of (or experimented with) oral sex, thinking that it is not sex or that it is okay because they are still virgins. It may be necessary to explain that vaginal sex means putting the penis into the vagina. There is no simple answer here because we need to explain that virginity is more than an intact hymen. There are many behaviours which need to be classed as 'sexual activity', that are too intimate for young people to engage in. One way to invite students into this conversation is suggested in Lesson One.

4. Pre-semen: before ejaculation, some fluid is present on the tip of the penis. It contains sperm cells and can also carry sexually transmitted infections. Therefore, even withdrawing the penis from the vagina before ejaculating still carries a risk of pregnancy or infection.

5. Is Church teaching out of touch with today's reality? Perhaps when faced with the barrage of messages confronting our youth, they might think this. A good way to respond is to turn the question back to them e.g.,
 What does the Catholic Church teach about sex before marriage? The Anglican Church? The Presbyterian Church? The Evangelical churches? Judaism? Islam?, etc.
All these faith traditions together add up to thousands of years of wisdom and understanding, so why do you think they all teach that sex belongs in marriage? Do you think they might be on to something? The wisdom of all these faith traditions is that develop into a happier, well-rounded young person if you do not 'short circuit' your growth by early sexual involvement. Your elders do not want you to be hurt or feel used. It has been said that few people ever regret having sex too late but many regret getting into things and being hurt too early.

6. Although we hope and pray that our young people will embrace chastity as a way to continue to respond to God's call to become the best they can be, there may be some who do contract an STI. Somehow we have to encourage them to tell their parents (and if that seems impossible, a trusted adult) and see a doctor despite their shame and embarrassment. It is a sad comment on our society's trivialization of sex – that a teen might share the most private parts of their body with another teen yet be so reluctant to take care of their body by seeing a doctor if they suspect an infection.

SPECIFIC EXPECTATIONS:

Students will continue to:

- Deepen their understanding of the role of sexuality in their relationships (*Fully Alive*)
- Explain the term abstinence in its relationship to the practice of chastity as they apply it to healthy expressions of sexuality (*adapted from Healthy Living – Health and Physical Education*)

ASSESSMENT OPPORTUNITIES

1. Create healthy living posters or collages to follow the introductory discussion. Make sure they include wise decisions about sexuality.
2. Develop a class code for Healthy Living.
3. Design a *Jeopardy*-style game. Small groups design scenarios to arrive at the question. i.e., The bad fat in foods – What are trans fats? Foods with no nutritional value – What are junk foods? Using only organic fertilizer on your lawn – What is a pesticide free lawn? Deciding on boundaries about how you will express love and affection with a girlfriend/boyfriend. What is abstinence? Choose teams and an MC to play the game.

TEACHING/LEARNING STRATEGIES

1. Brainstorm a list of all the healthy living trends today (whole class or small groups)
 - 0 trans fats
 - Canada's food rules
 - Organic foods
 - Free range animals
 - Vegetarians
 - Pesticide use on lawns and playing fields
 - Recycling
 - Hybrid cars
 - Obesity in children
 - Frequent hand washing
 - Smoking bans
 - Prayer
 - Exercise as a way of life
 - Drinking and driving

2. Journal entry
 - Develop all the healthy living goals you have chosen for yourself as you grow through your teen years.
 - Who and what will help you stick to these goals?
 - How will you support your friends in keeping their goals?

3. Share in pairs, triads or small groups to build up a class list on chart paper.

4. Ask the question, 'Is anything missing?' Hopefully someone will add that decisions about sexuality need to be part of our goals. If not, you will have to introduce the idea. The current Fully Alive program has an excellent section on decision making on p. 98-99 of the student text.

5. **Take time to define abstinence** – see pp. 98-100 in *Fully Alive*.
 1. The concept of virginity must be broadened beyond the 'intact hymen' mentality or only absence of vaginal intercourse. There are other sexually intimate acts which prepare the body for intercourse (foreplay) that are all part of sexual activity. To be chaste, to be virginal, means not sharing the most intimate and private parts of your body until you have grown into that right in the committed relationship of marriage. Therefore, there are good, fun and appropriate ways to express love and affection as you grow through your teen years and there are other expressions that you are just not ready for.

2. One way to illustrate this is to draw a large inverted triangle on the board with a line running through the middle. Above the line are appropriate ways to express affection; below, activities which prepare our bodies for intercourse and therefore are part of sexual activity.
3. Above the line: hugging, holding hands, eye contact, smiling, writing notes (may need some qualification), talking, doing things together. If someone asks about French kissing, probably it belongs right on the line because it can lead to further arousal.
4. Below the line: touching private parts, removing some or all clothing, oral sex, anal sex, intercourse.
5. Because of so much media and music exposure, many students think this is the way they are supposed to be sexual. They are often comforted when you tell them that they never have to do anything sexual that hurts them or makes them uncomfortable or grosses them out – even when they are married. In the beauty of marriage, in the mutual giving of their bodies, a couple learns the most loving ways to be procreative and give pleasure to each other. In this way chastity, as respect, reverence and dignity is lived in marriage too.
6. Give time to make this goal part of their journal entry. They may want to keep this private, but some general thoughts should be shared.
 - What are some good ways you might choose to express affection with a partner when the time comes?
 - Who and what will help you stick to these goals?
 - How will you support your friends in keeping their goals?

Remind them, that just as good friends will ‘smarten you up’ if you think of smoking or another risky practice, so also can friends help us to stick to our goals about sexuality.

STI's Grade 7

Lesson Two

INFORMATION ABOUT STI'S (ABSTINENCE IS THE ONLY SURE PROTECTION)

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MATERIALS

- Overheads of the following information about STI's
- Black Line Master I: Thoughts About STI's
- Black Line Master II: Faq's Quiz

DESCRIPTION

This Lesson introduces the What, How and Where of 4 STI's: Chlamydia, Hepatitis B, Human Papilloma Virus, and AIDS. It also explains that there are some genital infections that are not STI's and encourages students to seek treatment even if they are embarrassed. Abstinence is always emphasized as the only safe choice.

NOTES TO THE TEACHER: Information is included in the lesson materials.

SPECIFIC EXPECTATIONS

Students will continue to:

- Identify the methods of transmission and the symptoms of some STI's (*adapted from MOE Healthy Living – Health and Physical Education, 1998*)
- Identify sources of support with regard to issues related to healthy sexuality (e.g. parents/guardians, doctors, etc.) (*adapted from MOE Healthy Living – Health and Physical Education, 1998*)

ASSESSMENT OPPORTUNITIES

1. Black Line Master 1: Thoughts About STI's
2. Black Line Master 2: FAQ's Quiz
3. You might use the FAQ's quiz as just true/false or you might ask students to explain their answers to select questions – your choices or their choices.
4. Research project and presentation: AIDS in Africa. (integrate with language arts curriculum). Depending on your time-frame, this assignment could be done individually, with partners or small groups. Rather than focusing on causes, it would be more effective and personal to learn about the orphans and the grandmothers who are the only ones left to raise them. Critical to this study is to find out about the Grandmothers to Grandmothers Campaign which is growing all across Canada. If there is a Grandmothers Group in your area, perhaps a guest

speaker could be arranged. Information about Grandmothers groups can be found at www.stephenlewisfoundation.org

5. Another resource for this research project would be the DVD *AIDS/HIV* prepared by John Podgorski, Ottawa Catholic School Board, 2006.

TEACHING / LEARNING STRATEGIES

1. INTRODUCTION

Begin with a statement such as:

Throughout this unit, I hope you are getting the message that sex is too good, too powerful, to be treated on the same level as going out for fries and a coke. I hope that you will make abstinence your goal because that will help you develop your capacity for friendship and relationship building which is such a huge part of life as a young person. Yet there are some sobering dangers about sex that you need to know about.

Write STI's on the board and see if anyone knows what it means.

They are also known as STD's (sexually transmitted disease) or venereal disease (VD).

We use the term sexually transmitted infection because a person may have one of these infections and have no symptoms of disease. But they can still pass on the infection to their partner.

2. DISCOVERY

The following information may be put on overhead.

WHAT?

- A sexually transmitted infection (STI) is a type of infection caused by bacteria, viruses or parasites. Some are easily cured if caught in time; however, some do not present symptoms right away. Others have no cure.

HOW?

- They are spread through sexual intercourse (vaginal, anal, or oral*) with a **PERSON WHO IS INFECTED**.
- Some STI's may be spread by sharing drug needles
- Some can be passed on to the baby during birth
- They are transmitted through sex because the bacteria or viruses travel in blood, semen, vaginal fluids, and saliva. Saliva can spread some STI's if you have a tiny cut in or around your mouth (oral sex).
- You can catch STI's more than once and you can have more than one STI at a time.

*see Responding to Delicate Issues in Lesson One for a suggested way to explain oral and anal sex

WHERE?

- In Canada, the highest rates and increases in STI's are in young people ages 15 to 24. (Health Canada, 2002)

SOME SEXUALLY TRANSMITTED INFECTIONS THAT CAN BE TREATED AND CURED

CHLAMYDIA (a serious bacterial sexually transmitted infection that can damage the reproductive organs if untreated)

SYMPTOMS

- Sometimes a woman will never know she is infected but can still pass on the infection to her partner or baby
- Men often have no symptoms but can pass the infection to a partner
- If symptoms do appear it is usually one to three weeks after sex **WITH AN INFECTED PERSON**

WHAT TO LOOK FOR IN WOMEN

- New or different discharge from the vagina (remember after puberty, some discharge from the vagina is normal)
- Burning feeling when urinating
- Vaginal bleeding between periods

WHAT TO LOOK FOR IN MEN

- Burning feeling when urinating or frequent need to urinate
- Watery discharge from the penis
- Itching around the opening of the penis

DIAGNOSIS AND TREATMENT

- A urine test can detect Chlamydia and it can be treated with antibiotics, prescribed by a doctor. However, a person can get Chlamydia again from the same partner if that partner is not treated also.

COMPLICATIONS IF THERE IS NO TREATMENT

- the infection could spread to all the female reproductive organs and cause a serious condition called PID or Pelvic Inflammatory Disease
- A woman might have problems later in life getting pregnant or pass the infection to her unborn baby
- Can result in sterility for both males and females

HEPATITIS B (an infection of the liver caused by a virus)

The good news is that hepatitis B can be prevented by a vaccine. Currently, all grade 7 students in Ontario are given the vaccine at school. However, it is possible that some students missed this opportunity. Parents/guardians can check to see if their student has been inoculated by calling *Health Connection* at 1- 800-461 -2135. They will direct the caller to the Public Health Department that has their particular child's record. This vaccine is essential because, besides being an STI, Hepatitis B can also be transmitted by:

- Sharing drug needles
- Non-sterile instruments used in body-piercing, tattooing, or hair removal.
- Sharing toothbrushes or razors
- Contaminated water or ice cubes (sometimes in vacation destinations that do not have safe water treatment facilities)

SYMPTOMS

- Usually none
- Sometimes symptoms appear two to six months after being infected
- Poor appetite, nausea, vomiting
- Headaches
- Feeling very tired and generally unwell
- Jaundice (yellow colouring of the eyes and skin)

DIAGNOSIS AND TREATMENT

- Only a doctor can tell through a blood test
- The doctor will prescribe treatment

COMPLICATIONS IF THERE IS NO TREATMENT

- Some people can carry the infection the rest of their lives with no symptoms but can still give it to other people
- Can cause serious problems later in life including liver disease and cancer of the liver.

HUMAN PAPILLOMA VIRUS (HPV)

There are more than 100 strains of HPV, the most common sexually transmitted infection in the world.

- HPV is spread through sex or close skin-to skin, genital area contact WITH SOMEONE WHO IS INFECTED.
- Some strains of HPV cause genital warts which appear on or around the genitals. Only a doctor can determine if these warts are the ones caused by the HPV virus. It is always essential to see your doctor if you think there is anything unusual in the genital area (if you have never had sex – vaginal, oral or anal - you cannot get the HPV virus.) But there may be other genital infections that are not connected to sexual activity that still need treatment. *
- The doctor can treat the warts but a person may not be cured of the HPV infection and can always infect a partner.
- Other strains of HPV cause cervical cancer. The cervix is the opening to the womb or uterus, deep inside the woman's body. Cervical cancer might not develop until years after initial infection. It is estimated that one woman a day in Canada dies of cervical cancer.
- There are no early symptoms but there is a special test for women called a Pap test that a doctor can use to check to see if the cells of the cervix have changed in a way that can lead to cancer.

BREAKING NEWS

- As of 2007, there is a vaccine, Gardasil, available to women that can protect against some (but not all) strains of the virus which cause most of the cancers and genital warts. At this time it can be given to girls between the ages of 9-26 as a series of three doses over six months. You may want to ask you parent(s) or check with your doctor about the benefits and risks of receiving this vaccine. It is still very expensive because it is not covered by Canadian public health plans. (about \$400) But watch for more breaking news on this important subject!

***COMMON CONDITIONS THAT ARE NOT STI's**

Yeast Infections

- There is a delicate balance of healthy bacteria in the vagina but sometimes something disrupts that balance and causes a yeast infection. This has nothing to do with STI's, and although they do not cause permanent harm, they are uncomfortable and need treatment. A heavy chunky discharge that smells bad might be a sign of a yeast infection. Treatment is very effective and takes a few days.
- Things that can upset the vaginal balance: antibiotics for another illness, stress, too much sugar or chocolate, perfumes or deodorant sprays in the vaginal area, jeans or panties that are too tight and don't allow any air circulation.

Epididymitis

- This is an inflammation of the male genitals (not STI related)
- Sometimes harmless bumps appear on the penis. Check with your doctor – they will always be glad to answer questions that could worry you.
- Underwear and very tight pants can cause inflammation and can also interfere with sperm production. Remember, sperm needs a temperature lower than body temperature to develop).

HIV/AIDS

The Ontario Catholic Schools curriculum *Aids: A Catholic Educational Approach to HIV* provides comprehensive lessons for the grade seven level. Therefore, this section of Fully Alive will just present a brief overview in order to situate the topic within the context of STI's in general.

Canadian Statistics

From the start of testing in November 1985, until the end of June 2006, there have been approximately 56,000 diagnosed cases of HIV in adults 15 years and over. In that same time period, over 20,000 Canadians have been diagnosed with AIDS. (Health Canada, www.avert.org/canstatg.htm)

HIV is spread by direct sexual contact with anyone who has HIV. Cases of transmission by male-female sex are increasing in Canada. HIV is not a 'gay' disease; in fact, around the world the number one mode of transmission is heterosexual (male-female) sex.

There is no cure for HIV infection. Once infected, you have HIV for life. There are treatments (a veritable 'cocktail' of very expensive medications) that may slow the progress of the disease enabling the infected person to 'live with HIV' for some years but eventually all or most persons infected with HIV will develop AIDS. AIDS is fatal.

How HIV/AIDS is Spread

- The virus is spread through body fluids such as blood, semen, pre-semen*, vaginal fluids, and breast milk.
- Although the virus can be found in saliva, sweat and tears, the concentration is very low. These fluids are not known to spread the virus.
- Sharing drug needles or other skin piercing equipment can also spread the virus if the person using this equipment is infected.
- Although the risk is low, sharing personal items like toothbrushes or razors with someone who is infected could spread the HIV virus. Even if there is no risk of any type of infection, these types of personal items are not meant to be shared with anyone!
- HIV can be transmitted from an HIV positive mother to her baby during pregnancy, during birth, or afterwards through breastfeeding. There are HIV antiviral drugs that significantly reduce the chances of an HIV+ mother transmitting HIV to her baby.

*see Delicate Issues in the Overview section of the unit.

You Cannot Get HIV/AIDS from:

- everyday contact such as touching, hugging, shaking hands with an infected person, eating with them or going to school with them

- swimming pools or hot tubs
- telephones or toilet seats or water fountains
- bed sheets or towels
- forks, spoons, cups, food
- mosquitoes, insects or animals
- Coughs or sneezes
- Donating blood or blood transfusions, (since 1985 and the way donated blood is treated in Canada).

Diagnosis

- If a person has engaged in the above dangerous behaviours and are worried that they may have come in contact with HIV/AIDS, they need to see a doctor or go to a local health clinic. A blood test can be given if a person wants to confirm their HIV status. However, sometimes it takes up to 3 months for a test to reveal infection, so you might have to have the blood test repeated in 3 months (if you have done these high risk behaviours).
- Doctors must report a positive HIV result to the Public Health Department and any sex partners a person has had must be notified so that they can be tested. An HIV diagnosis cannot be kept secret.

(C) Prevention

Explain why abstinence is the only certain, 100% way to avoid STI's.

Thoughts About STI's:

1. Some things that I already knew.....
2. Some things that I learned...
3. Something that surprised me...
4. Something that made me feel sad...
5. Something that gave me hope...
6. A goal I have set for myself...
7. Something I will tell my parents/guardians or
older siblings...
8. Something I had wrong...
9. Something I had never thought about before...
10. Abstinence is the only way to prevent an STI
because...

FAQ's Quiz (True/False)

BLM 2

1. Frequent hand washing, exercise, eating fruits and vegetables and drinking pop are all part of a healthy lifestyle. _____
2. Students in grade 7 are old enough to make some personal healthy lifestyle decisions. _____
3. Thinking ahead about how to honour your gift of sexuality is necessary for good decision making. _____
4. You should not make decisions about sex ahead of time because it is better to just 'go with the flow' when you go out with someone. _____
5. STI means sexually transmitted infection. _____
6. Only older adults can get an STI. _____
7. Abstinence means that you will not hold hands, hug or kiss someone you are going out with. _____
8. Abstinence means that you will not share your body in sexually intimate acts until you have that right and privilege in a committed married relationship. _____
9. A person can get the same STI more than once. _____
10. Human Papillomavirus (HPV) is the most common STI in the world. _____
11. Some strains of HPV can lead to cervical cancer in men and women. _____
12. There is a new vaccine that can protect against some of the strains of HPV that cause genital warts and cervical cancer. _____
13. There is a cure for HIV/AIDS. _____
14. You can get HIV/AIDS from hugging or shaking hands with an infected person. _____
15. An HIV positive mother can pass the infection to her baby during pregnancy, birth or through breast feeding. _____
16. There are some other infections of the genital areas that are not STI's but still require treatment. _____
17. An STI will go away without treatment if you just wait long enough. _____
18. The ONLY reason you shouldn't have sex until you are married is because you might get an STI. _____
19. Since God created each of us as sexual beings, God knows all about sex and calls us to take care of this great gift as we grow through our teen years. _____

Faq's Quiz (True/False)

1. Frequent hand washing, exercise, eating fruits and vegetables and drinking pop are all part of a healthy lifestyle. (false – drinking pop is not healthy)
2. Students in grade 7 are old enough to make some personal healthy lifestyle decisions. (true)
3. Thinking ahead about how to honour your gift of sexuality is necessary for good decision making. (true)
4. You should not make decisions about sex ahead of time because it is better to just 'go with the flow' when you go out with someone. (false – it is important to think about boundaries long before the situation arises)
5. STI means sexually transmitted infection. (true)
6. Only older adults can get an STI. (false)
7. Abstinence means that you will not hold hands, hug or kiss someone you are going out with. (false – these are actually good ways to express affection)
8. Abstinence means that you will not share your body in sexually intimate acts until you have that right and privilege in a committed married relationship. (true)
9. A person can get the same STI more than once. (true)
10. Human Papillomavirus (HPV) is the most common STI in the world. (true)
11. Some strains of HPV can lead to cervical cancer in men and women. (false – men cannot get cervical cancer because they do not have a cervix)
12. There is a new vaccine that can protect against some of the strains of HPV that cause genital warts and cervical cancer. (true)
13. There is a cure for HIV/AIDS. (false)
14. You can get HIV/AIDS from hugging or shaking hands with an infected person. (false)
15. An HIV positive mother can pass the infection to her baby during pregnancy, birth or through breast feeding. (true)
16. There are some other infections of the genital areas that are not STI's but still require treatment. (true)
17. An STI will go away without treatment if you just wait long enough. (false)
18. The ONLY reason you shouldn't have sex until you are married is because you might get an STI. (false)
19. Since God created each of us as sexual beings, God knows all about sex and calls us to take care of this great gift as we grow through our teen years. (true)

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